

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10764510
APPLICANT(S)

FILING DATE 01-27-04

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2	1					
3		2				
4		2				
5		2				
6		2				
7		2				
8		2				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15	1					
16		2				
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TOTAL IND.	4					
TOTAL DEP.	40					
TOTAL CLAIMS	44					
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